WOODLANDS OF GILLETT 330 ROBINHOOD LANE

GILLETT	54124	Phone: (920) 855-2136		Ownership:	Corporation
Operated from	1/1 To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Con	junction with	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and St	affed (12/31/05):	43	Title 18 (Medicare) Certified?	Yes
Total Licensed	Bed Capacity	(12/31/05):	43	Title 19 (Medicaid) Certified?	Yes
Number of Peci	dents on 12/31	/05.	36	Average Daily Cengus:	36

Age, Gender, and Primary Diagnosis of	f Residents (12/	31/05)		Length of Stay (12/31/05)	%
Primary Diagnosis	%	Age Groups 	* 	   Less Than 1 Year   1 - 4 Years	33.3 47.2
Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years	19.4
Mental Illness (Org./Psy)	30.6	65 - 74	2.8		
Mental Illness (Other)	0.0	75 - 84	33.3		100.0
Alcohol & Other Drug Abuse	0.0	85 - 94	61.1		
Para-, Quadra-, Hemiplegic	2.8	95 & Over	2.8	Full-Time Equivalent	
Cancer	0.0			Nursing Staff per 100 Resid	lents
Fractures	0.0		100.0	(12/31/05)	
Cardiovascular	38.9	65 & Over	100.0		
Cerebrovascular	8.3			RNs	5.8
Diabetes	8.3	Gender	%	LPNs	12.9
Respiratory	0.0			Nursing Assistants,	
Other Medical Conditions	11.1	Male	27.8	Aides, & Orderlies	49.5
		Female	72.2	İ	
	100.0	j		j	
		İ	100.0		

## Method of Reimbursement

		edicare itle 18			Medicaid 'itle 19			Other			Private Pay	2		amily Care			anaged Care	<u>l</u>		
Level of Care	No.	્ર	Per Diem (\$)	No.	્ર	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	2	100.0	345	24	85.7	111	1	100.0	131	5	100.0	164	0	0.0	0	0	0.0	0	32	88.9
Intermediate				4	14.3	92	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	11.1
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt O	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	2	100.0		28	100.0		1	100.0		5	100.0		0	0.0		0	0.0		36	100.0

WOODLANDS OF GILLETT

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/05
Deaths During Reporting Period				0.27. 1'			
					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of		Number of
Private Home/No Home Health	28.6	Daily Living (ADL)	Independent	One	or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0		38.9	61.1	36
Other Nursing Homes	11.4	Dressing	5.6		61.1	33.3	36
Acute Care Hospitals	60.0	Transferring	30.6		41.7	27.8	36
Psych. HospMR/DD Facilities	0.0	Toilet Use	19.4		41.7	38.9	36
Rehabilitation Hospitals	0.0	Eating	75.0		16.7	8.3	36
Other Locations	0.0	******	******	*****	******	******	*****
Total Number of Admissions	35	Continence		8	Special Treatmen	ts	용
Percent Discharges To:		Indwelling Or Extern	nal Catheter	0.0	Receiving Resp	iratory Care	5.6
Private Home/No Home Health	27.0	Occ/Freq. Incontine	nt of Bladder	50.0	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	2.7	Occ/Freq. Incontine	nt of Bowel	16.7	Receiving Suct	ioning	0.0
Other Nursing Homes	2.7	_			Receiving Osto	my Care	0.0
Acute Care Hospitals	5.4	Mobility			Receiving Tube	Feeding	0.0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	2.8	Receiving Mech	anically Altered Diets	33.3
Rehabilitation Hospitals	0.0				3	-	
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	59.5	With Pressure Sores		2.8	Have Advance D	irectives	97.2
Total Number of Discharges		With Rashes		2.8	Medications		
(Including Deaths)	37					hoactive Drugs	75.0

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

*************	******	*****	******	*****	*****	*****	*****	*****	*****
		Own	Ownership:		Size:	Lic	ensure:		
	This	Pro	prietary	Und	er 50	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	90	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	83.7	82.2	1.02	89.7	0.93	86.0	0.97	88.1	0.95
Current Residents from In-County	72.2	71.1	1.02	66.2	1.09	74.9	0.96	77.6	0.93
Admissions from In-County, Still Residing	25.7	17.9	1.44	26.8	0.96	19.6	1.31	18.1	1.42
Admissions/Average Daily Census	97.2	152.6	0.64	98.1	0.99	139.3	0.70	162.3	0.60
Discharges/Average Daily Census	102.8	153.4	0.67	98.1	1.05	139.6	0.74	165.1	0.62
Discharges To Private Residence/Average Daily Census	30.6	75.7	0.40	25.6	1.20	64.3	0.48	74.8	0.41
Residents Receiving Skilled Care	88.9	95.4	0.93	85.3	1.04	96.4	0.92	92.1	0.97
Residents Aged 65 and Older	100	94.2	1.06	92.3	1.08	92.9	1.08	88.4	1.13
Title 19 (Medicaid) Funded Residents	77.8	72.3	1.08	70.6	1.10	69.8	1.11	65.3	1.19
Private Pay Funded Residents	13.9	16.4	0.85	18.8	0.74	19.0	0.73	20.2	0.69
Developmentally Disabled Residents	0.0	0.8	0.00	0.7	0.00	0.7	0.00	5.0	0.00
Mentally Ill Residents	30.6	28.0	1.09	56.6	0.54	34.7	0.88	32.9	0.93
General Medical Service Residents	11.1	26.7	0.42	13.6	0.82	21.9	0.51	22.8	0.49
Impaired ADL (Mean)	54.4	46.8	1.16	50.4	1.08	47.4	1.15	49.2	1.11
Psychological Problems	75.0	55.5	1.35	68.0	1.10	59.0	1.27	58.5	1.28
Nursing Care Required (Mean)	5.6	6.9	0.80	6.2	0.90	7.2	0.78	7.4	0.75